## FORM PFS PERSONAL FINANCIAL STATEMENT **COVER SHEET** PAGE 1 PAGE# Filed in accordance with chapter 572 of the Government Code. 16 For filings required in 2019, covering calendar year ending December 31, 2018. ACCOUNT # Use FORM PFS--INSTRUCTION GUIDE when completing this form. 00020257 1 NAME TITLE; FIRST; MI **OFFICE USE ONLY** The Honorable Eduardo A. **ELECTRONICALLY FILED** NICKNAME; LAST; SUFFIX 04/25/2019 Eddie Lucio Jr. 2 ADDRESS ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP Receipt # P.O. Box 5958 HD / PM Amount Brownville, TX 78523 Date Processed (CHECK IF FILER'S HOME ADDRESS) AREA CODE PHONE NUMBER; EXTENSION **TELEPHONE** Date Imaged NUMBER REASON FOR FILIING STATEMENT CANDIDATE \_\_\_\_\_ (INDICATE OFFICE) ELECTED OFFICER Texas Senate (INDICATE OFFICE) APPOINTED OFFICER \_\_\_\_\_\_ (INDICATE AGENCY) EXECUTIVE HEAD \_\_\_\_\_ (INDICATE AGENCY) FORMER OR RETIRED JUDGE SITTING BY ASSIGNMENT STATE PARTY CHAIR \_\_\_\_\_\_ (INDICATE PARTY) OTHER \_\_\_\_\_ (INDICATE POSITION) **5** Family members whose financial activity you are reporting (see instructions). Herminia Lucio SPOUSE **DEPENDENT CHILD** In Parts 1 through 18, you will disclose your financial activity during the preceding calendar year. In Parts 1 through 14, you are required to disclose not only your own financial activity, but also that of your spouse or a dependent child (see instructions).

#### SOURCES OF OCCUPATIONAL INCOME PART 1A If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report. When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. 1 INFORMATION RELATES TO X FILER SPOUSE DEPENDENT CHILD \_\_\_ 2 EMPLOYMENT NAME AND ADDRESS OF EMPLOYER / POSITION HELD X EMPLOYED BY ANOTHER (Check if Filer's Home Address) **EMPLOYER** Rio Shelters, Inc. ADDRESS / PO BOX; APT / SUITE #; CITY: STATE: ZIP CODE 35 North Park Plaza Brownsville, TX 78521 **POSITION HELD** President NATURE OF OCCUPATION SELF-EMPLOYED INFORMATION RELATES TO X FILER SPOUSE DEPENDENT CHILD \_\_ **EMPLOYMENT** NAME AND ADDRESS OF EMPLOYER / POSITION HELD X EMPLOYED BY ANOTHER (Check if Filer's Home Address) **EMPLOYER** Rio Consultants ADDRESS / PO BOX; ZIP CODE APT / SUITE #; CITY; STATE: 35 North Park Plaza Brownsville, TX 78521 POSITION HELD President NATURE OF OCCUPATION SELF-EMPLOYED INFORMATION RELATES TO X FILER SPOUSE DEPENDENT CHILD \_\_\_ **EMPLOYMENT** NAME AND ADDRESS OF EMPLOYER / POSITION HELD X EMPLOYED BY ANOTHER (Check if Filer's Home Address) **EMPLOYER** Lone Star Golf Carts ADDRESS / PO BOX; APT / SUITE #; ZIP CODE CITY; STATE; 35 North Park Plaza Brownsville, TX 78521 **POSITION HELD**

SELF-EMPLOYED

Manager

NATURE OF OCCUPATION

STOCK PART 2

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

List each business entity in which you, your spouse, or a dependent child held or acquired stock during the calendar year and indicate the category of the number of shares held or acquired. If some or all of the stock was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS--INSTRUCTION GUIDE.

1	BUSINESS EN	TITY	Rio Shelters, Inc.		NAME	
2	STOCK HELD ACQUIRED BY		X FILER	SPOUSE	DEPENDENT CHILD	)
3	NUMBER OF S	SHARES	LESS THAN 100	100 TO 499	500 TO 999	X 1,000 TO 4,999
			LESS THAN 10K	10,000 OR MORE		
4	IF SOLD	NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
	BUSINESS EN	TITY	Hama Danat Inc		NAME	
	STOCK HELD	OR	Home Depot, Inc.			
	ACQUIRED BY	,	FILER	X SPOUSE	DEPENDENT CHILD	)
	NUMBER OF S	SHARES	LESS THAN 100	X 100 TO 499	500 TO 999	1,000 TO 4,999
			LESS THAN 10K	10,000 OR MORE		
	IF SOLD	NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
	BUIGINIESS EN	TITV I			NAME	
	BUSINESS EN	TITY	McDonalds Corp		NAME	
	STOCK HELD ACQUIRED BY	OR	McDonalds Corp	X SPOUSE	NAME  DEPENDENT CHILD	)
	STOCK HELD	OR ,				
	STOCK HELD ACQUIRED BY	OR ,	FILER	X SPOUSE	DEPENDENT CHILD	_
	STOCK HELD ACQUIRED BY	OR ,	FILER  LESS THAN 100	X SPOUSE  X 100 TO 499	DEPENDENT CHILD	_
	STOCK HELD ACQUIRED BY NUMBER OF S	OR  SHARES  NET GAIN NET LOSS	FILER  LESS THAN 100  LESS THAN 10K  LESS THAN \$5,000	X SPOUSE  X 100 TO 499  10,000 OR MORE  \$5,000 - \$9,999	DEPENDENT CHILD	1,000 TO 4,999
	STOCK HELD ACQUIRED BY NUMBER OF S	OR SHARES  NET GAIN NET LOSS  TITY	FILER  LESS THAN 100  LESS THAN 10K	X SPOUSE  X 100 TO 499  10,000 OR MORE  \$5,000 - \$9,999	DEPENDENT CHILD 500 TO 999  \$10,000 - \$24,999	1,000 TO 4,999
	STOCK HELD ACQUIRED BY NUMBER OF S	OR  SHARES  NET GAIN NET LOSS  TITY  OR	FILER  LESS THAN 100  LESS THAN 10K  LESS THAN \$5,000	X SPOUSE  X 100 TO 499  10,000 OR MORE  \$5,000 - \$9,999	DEPENDENT CHILD 500 TO 999  \$10,000 - \$24,999	1,000 TO 4,999  \$25,000OR MORE
	STOCK HELD ACQUIRED BY NUMBER OF S  IF SOLD  BUSINESS EN	OR  SHARES  NET GAIN NET LOSS  TITY  OR	FILER  LESS THAN 100  LESS THAN 10K  LESS THAN \$5,000  Fundamental Investmental	X SPOUSE  X 100 TO 499  10,000 OR MORE  \$5,000 - \$9,999  ents, Inc.	DEPENDENT CHILD 500 TO 999  \$10,000 - \$24,999	1,000 TO 4,999  \$25,000OR MORE
	STOCK HELD ACQUIRED BY NUMBER OF S  IF SOLD  BUSINESS EN  STOCK HELD ACQUIRED BY	OR  SHARES  NET GAIN NET LOSS  TITY  OR	FILER  LESS THAN 100  LESS THAN 10K  LESS THAN \$5,000  Fundamental Investmental Investmental FILER	X SPOUSE  X 100 TO 499  10,000 OR MORE  \$5,000 - \$9,999  ents, Inc.  X SPOUSE	DEPENDENT CHILD  500 TO 999  \$10,000 - \$24,999  NAME  DEPENDENT CHILD	1,000 TO 4,999  \$25,000OR MORE
	STOCK HELD ACQUIRED BY NUMBER OF S  IF SOLD  BUSINESS EN  STOCK HELD ACQUIRED BY	OR  SHARES  NET GAIN NET LOSS  TITY  OR	FILER  LESS THAN 100  LESS THAN 10K  LESS THAN \$5,000  Fundamental Investmental Inv	X SPOUSE  X 100 TO 499  ☐ 10,000 OR MORE  ☐ \$5,000 - \$9,999  ents, Inc.  X SPOUSE  ☐ 100 TO 499	DEPENDENT CHILD  500 TO 999  \$10,000 - \$24,999  NAME  DEPENDENT CHILD	1,000 TO 4,999  \$25,000OR MORE

**STOCK** PART 2 If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report. List each business entity in which you, your spouse, or a dependent child held or acquired stock during the calendar year and indicate the category of the number of shares held or acquired. If some or all of the stock was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS--INSTRUCTION GUIDE. When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. **BUSINESS ENTITY** NAME International Bancshares Corp STOCK HELD OR X SPOUSE FILER DEPENDENT CHILD **ACQUIRED BY** 3 NUMBER OF SHARES LESS THAN 100 X 100 TO 499 500 TO 999 1,000 TO 4,999 LESS THAN 10K 10,000 OR MORE 4 IF SOLD NET GAIN LESS THAN \$5,000 \$5,000 - \$9,999 \$10,000 - \$24,999 \$25,000--OR MORE NET LOSS

# **INCOME FROM INTEREST, DIVIDENDS, ROYALTIES & RENTS**

PART 5

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

List each source of income you, your spouse, or a dependent child received in excess of \$500 that was derived from interest, dividends, royalties, and rents during the calendar year and indicate the category of the amount of the income. For more information, see FORM PFS--INSTRUCTION GUIDE.

1 SOURCE OF INCOME		NAME A	AND ADDRESS		
	Rental Income				
Publicly held corporation		PO BOX; APT / SUITE	#; CITY;	STATE;	ZIP CODE
	1505 W. Elizabeth				
	ı				
	Brownsville, TX 7852	20			
2 RECEIVED BY	FILER	X SPOUSE		- 0	
		X SPUUSE	DEPENDENT	CHILD	
3 AMOUNT	\$500 - \$4,999	\$5,000 - \$9,999	X \$10,000 - \$24	1,000	25,000OR MORE
		φυ,ουο φυ,υυυ	Λ Ψ10,000 Ψ2-	+,999 Ψ	25,000OIL WOILE
SOURCE OF INCOME		NAME A	AND ADDRESS		
SOUNCE OF INVOCALE	Social Security	14/ 114/ /	NID ADDITESS		
Publicly held corporation	ADDRESS /	PO BOX; APT / SUITE	#: CITY; 5	STATE; Z	ZIP CODE
I ability floid corporation.	P.O. Box 5958		., ,	···-,	
	Brownsville, TX 7852	23			
RECEIVED BY		_			
	X FILER	X SPOUSE	DEPENDENT	CHILD	
AMOUNT					
7 2	\$500 - \$4,999	\$5,000 - \$9,999	\$10,000 - \$24	1,999 X \$2	25,000OR MORE
I					
SOURCE OF INCOME			AND ADDRESS		
	International Bank of	Commerce			
SOURCE OF INCOME  X Publicly held corporation				STATE; Z	ZIP CODE
		Commerce		STATE; Z	ZIP CODE
		Commerce		STATE; Z	ZIP CODE
X Publicly held corporation		Commerce		STATE; Z	ZIP CODE
	ADDRESS /	Commerce PO BOX; APT / SUITE	#; CITY; \$		
X Publicly held corporation  RECEIVED BY		Commerce	#; CITY; \$	STATE; Z	
X Publicly held corporation	ADDRESS /	Commerce PO BOX; APT / SUITE	#; CITY; s	CHILD	
X Publicly held corporation  RECEIVED BY	ADDRESS /	Commerce PO BOX; APT / SUITE	#; CITY; \$	CHILD	
X Publicly held corporation  RECEIVED BY	ADDRESS /	Commerce PO BOX; APT / SUITE	#; CITY; s	CHILD	
X Publicly held corporation  RECEIVED BY	ADDRESS /	Commerce PO BOX; APT / SUITE	#; CITY; s	CHILD	
X Publicly held corporation  RECEIVED BY	ADDRESS /	Commerce PO BOX; APT / SUITE	#; CITY; s	CHILD	
X Publicly held corporation  RECEIVED BY	ADDRESS /	Commerce PO BOX; APT / SUITE	#; CITY; s	CHILD	
X Publicly held corporation  RECEIVED BY	ADDRESS /	Commerce PO BOX; APT / SUITE	#; CITY; s	CHILD	
X Publicly held corporation  RECEIVED BY	ADDRESS /	Commerce PO BOX; APT / SUITE	#; CITY; s	CHILD	
X Publicly held corporation  RECEIVED BY	ADDRESS /	Commerce PO BOX; APT / SUITE	#; CITY; s	CHILD	
X Publicly held corporation  RECEIVED BY	ADDRESS /	Commerce PO BOX; APT / SUITE	#; CITY; s	CHILD	
X Publicly held corporation  RECEIVED BY	ADDRESS /	Commerce PO BOX; APT / SUITE	#; CITY; s	CHILD	
X Publicly held corporation  RECEIVED BY	ADDRESS /	Commerce PO BOX; APT / SUITE	#; CITY; s	CHILD	

### PERSONAL NOTES AND LEASE AGREEMENTS

PART 6

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

Identify each guarantor of a loan and each person or financial institution to whom you, your spouse, or a dependent child had a total financial liability of more than \$1,000 in the form of a personal note or notes or lease agreement at any time during the calendar year and indicate the category of the amount of the liability. For more information, see FORM PFS--INSTRUCTION GUIDE.

PERSON OR INSTITUTION     HOLDING NOTE OR     LEASE AGREEMENT	Lone Star National E	ank		
2 LIABILITY OF	X FILER	X SPOUSE	DEPENDENT CHILE	)
3 GUARANTOR	NONE			
4 AMOUNT	\$1,000 - \$4,999	\$5,000 - \$9,999	\$10,000 - \$24,999	X \$25,000OR MORE
PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT	Lone Star National E	Bank		
LIABILITY OF	X FILER	SPOUSE	DEPENDENT CHILE	D
GUARANTOR	NONE			
AMOUNT	\$1,000 - \$4,999	\$5,000 - \$9,999	\$10,000 - \$24,999	X \$25,000OR MORE
PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT	Texas Regional Ban	k		
LIABILITY OF	X FILER	SPOUSE	DEPENDENT CHILE	D
GUARANTOR	NONE			
AMOUNT	\$1,000 - \$4,999	\$5,000 - \$9,999	X \$10,000 - \$24,999	\$25,000OR MORE
PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT	Lone Star National E	Bank		
LIABILITY OF	X FILER	X SPOUSE	DEPENDENT CHILE	)
GUARANTOR	NONE			
AMOUNT	\$1,000 - \$4,999	\$5,000 - \$9,999	\$10,000 - \$24,999	X \$25,000OR MORE

### **INTERESTS IN REAL PROPERTY**

PART 7A

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

Describe all beneficial interests in real property held or acquired by you, your spouse, or a dependent child during the calendar year. If the interest was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For an explanation of "beneficial interest" and other specific directions for completing this section, see FORM PFS--INSTRUCTION GUIDE.

which the child is listed on the Cover Sheet.	
1 HELD OR ACQUIRED BY	ENT CHILD
2 STREET ADDRESS  X NOT AVAILABLE CHECK IF FILER'S HOME ADDRESS  STREET ADDRESS, INCLUDING CITY, COUN	NTY, AND STATE
3 DESCRIPTION  NUMBER OF LOTS OR ACRES AND NAME OF COLUMN 9.00000 acres  X ACRES  Cameron	JNTY WHERE LOCATED
4 NAMES OF PERSONS RETAINING AN INTEREST  X NOT APPLICABLE (SEVERED MINERAL INTEREST)	
5 IF SOLD	\$24,999 \$25,000OR MORE
LIFLE OF ACCURETE BY	
HELD OR ACQUIRED BY  X FILER  X SPOUSE  DEPENDE	ENT CHILD
STREET ADDRESS STREET ADDRESS, INCLUDING CITY, COUNTY SPOUSE  NOT AVAILABLE CHECK IF FILER'S HOME ADDRESS Port Isabel, TX 78578	
STREET ADDRESS  STREET ADDRESS, INCLUDING CITY, COUNTY  NOT AVAILABLE  CHECK IF FILER'S  STREET ADDRESS, INCLUDING CITY, COUNTY  59 E. Scallop A	NTY, AND STATE
STREET ADDRESS  STREET ADDRESS, INCLUDING CITY, COUNTY  NOT AVAILABLE  CHECK IF FILER'S HOME ADDRESS  Port Isabel, TX 78578  DESCRIPTION  NUMBER OF LOTS OR ACRES AND NAME OF COUNTY  1.00000 lots	NTY, AND STATE

## **INTERESTS IN REAL PROPERTY**

PART 7A

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

Describe all beneficial interests in real property held or acquired by you, your spouse, or a dependent child during the calendar year. If the interest was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For an explanation of "beneficial interest" and other specific directions for completing this section, see FORM PFS--INSTRUCTION GUIDE.

1 HELD OR ACQUIRED BY	FILER	X SPOUSE	DEPENDENT CHILE	)
2 STREET ADDRESS		STREET ADDRESS, INCL	UDING CITY, COUNTY, AND	STATE
NOT AVAILABLE	148 Vista Verde Co	ndominium #268		
CHECK IF FILER'S				
HOME ADDRESS	Brownsville, TX 785	526		
3 DESCRIPTION		ER OF LOTS OR ACRES	AND NAME OF COUNTY WHI	ERE LOCATED
X LOTS	1.00000 lots			
ACRES	Cameron			
4 NAMES OF PERSONS RETAINING AN INTEREST	Cisneros, Lynda			
NOT APPLICABLE				
(SEVERED MINERAL INTEREST)				
INTEREST)				
5 IF SOLD NET GAIN	LESS THAN \$5,00	00 \$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
☐ NET LOSS				
HELD OR ACQUIRED BY				
HELD OR ACQUIRED BY	X FILER	X SPOUSE	DEPENDENT CHILE	)
HELD OR ACQUIRED BY STREET ADDRESS			DEPENDENT CHILE	
		STREET ADDRESS, INCL		
STREET ADDRESS  NOT AVAILABLE CHECK IF FILER'S	32699 San Carlos F	STREET ADDRESS, INCL		
STREET ADDRESS  NOT AVAILABLE		STREET ADDRESS, INCL		
STREET ADDRESS  NOT AVAILABLE CHECK IF FILER'S	32699 San Carlos F	STREET ADDRESS, INCL		
STREET ADDRESS  NOT AVAILABLE CHECK IF FILER'S	32699 San Carlos F Los Fresnos , TX 78	STREET ADDRESS, INCL Rd. 8566		STATE
STREET ADDRESS  NOT AVAILABLE CHECK IF FILER'S HOME ADDRESS	32699 San Carlos F Los Fresnos , TX 78	STREET ADDRESS, INCL Rd. 8566	UDING CITY, COUNTY, AND	STATE
STREET ADDRESS  NOT AVAILABLE CHECK IF FILER'S HOME ADDRESS  DESCRIPTION	32699 San Carlos F Los Fresnos , TX 78	STREET ADDRESS, INCL Rd. 8566	UDING CITY, COUNTY, AND	STATE
STREET ADDRESS  NOT AVAILABLE CHECK IF FILER'S HOME ADDRESS  DESCRIPTION LOTS X ACRES	32699 San Carlos F Los Fresnos , TX 78  NUMBE 10.00000 acres	STREET ADDRESS, INCL Rd. 8566	UDING CITY, COUNTY, AND	STATE
STREET ADDRESS  NOT AVAILABLE CHECK IF FILER'S HOME ADDRESS  DESCRIPTION LOTS	32699 San Carlos F Los Fresnos , TX 78  NUMBE 10.00000 acres	STREET ADDRESS, INCL Rd. 8566	UDING CITY, COUNTY, AND	STATE
STREET ADDRESS  NOT AVAILABLE CHECK IF FILER'S HOME ADDRESS  DESCRIPTION LOTS ACRES  NAMES OF PERSONS RETAINING AN INTEREST	32699 San Carlos F Los Fresnos , TX 78  NUMBE 10.00000 acres	STREET ADDRESS, INCL Rd. 8566	UDING CITY, COUNTY, AND	STATE
STREET ADDRESS  NOT AVAILABLE CHECK IF FILER'S HOME ADDRESS  DESCRIPTION LOTS X ACRES  NAMES OF PERSONS RETAINING AN INTEREST X NOT APPLICABLE (SEVERED MINERAL	32699 San Carlos F Los Fresnos , TX 78  NUMBE 10.00000 acres	STREET ADDRESS, INCL Rd. 8566	UDING CITY, COUNTY, AND	STATE
STREET ADDRESS  NOT AVAILABLE CHECK IF FILER'S HOME ADDRESS  DESCRIPTION LOTS X ACRES  NAMES OF PERSONS RETAINING AN INTEREST X NOT APPLICABLE	32699 San Carlos F Los Fresnos , TX 78  NUMBE 10.00000 acres	STREET ADDRESS, INCL Rd. 8566	UDING CITY, COUNTY, AND	STATE
STREET ADDRESS  NOT AVAILABLE CHECK IF FILER'S HOME ADDRESS  DESCRIPTION LOTS X ACRES  NAMES OF PERSONS RETAINING AN INTEREST X NOT APPLICABLE (SEVERED MINERAL	32699 San Carlos F Los Fresnos , TX 78  NUMBE 10.00000 acres	STREET ADDRESS, INCL Rd. 8566	UDING CITY, COUNTY, AND	STATE
STREET ADDRESS  NOT AVAILABLE CHECK IF FILER'S HOME ADDRESS  DESCRIPTION LOTS X ACRES  NAMES OF PERSONS RETAINING AN INTEREST X NOT APPLICABLE (SEVERED MINERAL	32699 San Carlos F Los Fresnos , TX 78  NUMBE 10.00000 acres	STREET ADDRESS, INCL Rd. 8566	UDING CITY, COUNTY, AND	STATE
STREET ADDRESS  NOT AVAILABLE CHECK IF FILER'S HOME ADDRESS  DESCRIPTION LOTS X ACRES  NAMES OF PERSONS RETAINING AN INTEREST X NOT APPLICABLE (SEVERED MINERAL	32699 San Carlos F Los Fresnos , TX 78  NUMBE 10.00000 acres	STREET ADDRESS, INCL Rd. 8566	UDING CITY, COUNTY, AND	STATE
STREET ADDRESS  NOT AVAILABLE CHECK IF FILER'S HOME ADDRESS  DESCRIPTION LOTS ACRES  NAMES OF PERSONS RETAINING AN INTEREST  NOT APPLICABLE (SEVERED MINERAL INTEREST)  IF SOLD  NET GAIN	32699 San Carlos F Los Fresnos , TX 78  NUMBE 10.00000 acres Cameron	STREET ADDRESS, INCL Rd. B566 ER OF LOTS OR ACRES A	LUDING CITY, COUNTY, AND	STATE  ERE LOCATED
STREET ADDRESS  NOT AVAILABLE CHECK IF FILER'S HOME ADDRESS  DESCRIPTION LOTS X ACRES  NAMES OF PERSONS RETAINING AN INTEREST X NOT APPLICABLE (SEVERED MINERAL INTEREST)	32699 San Carlos F Los Fresnos , TX 78  NUMBE 10.00000 acres	STREET ADDRESS, INCL Rd. B566 ER OF LOTS OR ACRES A	UDING CITY, COUNTY, AND	STATE

# **INTERESTS IN REAL PROPERTY**

PART 7A

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

Describe all beneficial interests in real property held or acquired by you, your spouse, or a dependent child during the calendar year. If the interest was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For an explanation of "beneficial interest" and other specific directions for completing this section, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about which the child is listed on the Co	t a dependent child's activity over Sheet.	, indicate the child about	whom you are reporting by p	roviding the number under
1 HELD OR ACQUIRED BY	FILER	X SPOUSE	DEPENDENT CHILI	D
2 STREET ADDRESS  NOT AVAILABLE CHECK IF FILER'S HOME ADDRESS	ST 1505 W. Elizabeth Brownsville, TX 78520		JDING CITY, COUNTY, AND	STATE
3 DESCRIPTION	NUMBER 1.00000 lots Cameron	OF LOTS OR ACRES A	ND NAME OF COUNTY WH	ERE LOCATED
4 NAMES OF PERSONS RETAINING AN INTEREST  X NOT APPLICABLE (SEVERED MINERAL INTEREST)				
5 IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE

### **INTEREST IN BUSINESS ENTITIES**

PART 7B

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

Describe all beneficial interests in business entities held or acquired by you, your spouse, or a dependent child during the calendar year. If the interest was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For an explanation of "beneficial interest" and other specific directions for completing this section, see FORM PFS--INSTRUCTION GUIDE.

ı	which the child	is listed on the Co	Wei Slieet.			
1	HELD OR ACQ	UIRED BY	X FILER	SPOUSE	DEPENDENT CHILD	
2	DESCRIPTION				ND ADDRESS Filer's Home Address)	
			Rio Shelters, Inc.	[ (Check ii F	Tilet's Home Address)	
			35 North Park Plaza			
			Brownsville, TX 78521			
3	IF SOLD	NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
	HELD OR ACQ	UIRED BY	X FILER	SPOUSE	DEPENDENT CHILD	
	DESCRIPTION				ND ADDRESS	
			Rio Consultants	(Check if F	Filer's Home Address)	
			35 North Park Plaza			
			Brownsville, TX 78521			
	IF SOLD	NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
		LUDED DV				
I	HELD OR ACQ	OIKED BY	₩ EN ED		D DEDENDENT OUT D	
			X FILER	SPOUSE	DEPENDENT CHILD	
	DESCRIPTION		X FILER	NAME AI	ND ADDRESS	
			Lone Star Golf Carts	NAME AI	<u> </u>	
				NAME AI	ND ADDRESS	
			Lone Star Golf Carts	NAME AI	ND ADDRESS	
			Lone Star Golf Carts 35 North Park Plaza	NAME AI	ND ADDRESS	
	DESCRIPTION	■ NET GAIN	Lone Star Golf Carts 35 North Park Plaza Brownsville, TX 78521	NAME AI	ND ADDRESS Filer's Home Address)	
	DESCRIPTION	■ NET GAIN	Lone Star Golf Carts 35 North Park Plaza Brownsville, TX 78521	NAME AI	ND ADDRESS Filer's Home Address)	
_	DESCRIPTION	■ NET GAIN	Lone Star Golf Carts 35 North Park Plaza Brownsville, TX 78521	NAME AI	ND ADDRESS Filer's Home Address)	
	DESCRIPTION	■ NET GAIN	Lone Star Golf Carts 35 North Park Plaza Brownsville, TX 78521	NAME AI	ND ADDRESS Filer's Home Address)	
	DESCRIPTION	■ NET GAIN	Lone Star Golf Carts 35 North Park Plaza Brownsville, TX 78521	NAME AI	ND ADDRESS Filer's Home Address)	
	DESCRIPTION	■ NET GAIN	Lone Star Golf Carts 35 North Park Plaza Brownsville, TX 78521	NAME AI	ND ADDRESS Filer's Home Address)	
	DESCRIPTION	■ NET GAIN	Lone Star Golf Carts 35 North Park Plaza Brownsville, TX 78521	NAME AI	ND ADDRESS Filer's Home Address)	

# **OWNERSHIP OF BUSINESS ASSOCIATIONS**

PART 11A

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

Describe each corporation, firm, partnership, limited partnership, limited liability partnership, professional corporation, professional association, joint venture, or other business association in which you, your spouse, or a dependent child held, acquired, or sold 5 percent or more of the outstanding ownership. For more information, see FORM PFS--INSTRUCTION GUIDE.

	the child is listed on the Cover S	but a dependent child's activity, indicate the child about whom you are reporting by providing the number under which Sheet.
1	BUSINESS ASSOCIATION	NAME AND ADDRESS  (Check If Filer's Home Address)  Rio Shelters Inc  PO Box 5958
Ļ		BROWNSVILLE, TX 78523
2	DESCRIPTION	
3	BUSINESS TYPE	X       Corporation       Limited Partnership       Profesional Association         Firm       Limited Liability Partnership       Joint Venture         Partnership       Professional Corporation       Other
4	HELD, ACQUIRED, OR SOLD BY	X FILER SPOUSE DEPENDENT CHILD
l		

## **ASSETS OF BUSINESS ASSOCIATIONS**

PART 11B

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

Describe all assets of each corporation, firm, partnership, limited partnership, limited liability partnership, professional corporation, professional association, joint venture, or other business association in which you, your spouse, or a dependent child held, acquired, or sold 50 percent or more of the outstanding ownership and indicate the category of the amount of the assets. For more information, see FORM PFS--INSTRUCTION GUIDE.

	the child is listed on the Cover S	heet.	
1	BUSINESS	NAME AND	ADDRESS
	ASSOCIATION	(Check If Filer's	s Home Address)
		Rio Shelters Inc	
		PO Box 5958	
		BROWNSVILLE, TX 78523	
_		<u> </u>	
2	BUSINESS TYPE	Corporation	
3	HELD, ACQUIRED,		
ľ	OR SOLD BY	X FILER SPOUSE	DEPENDENT CHILD
1	ASSETS	DESCRIPTION	CATEGORY
•	ASSETS	Furniture and Equipment	
			LESS THAN \$5,000
		į.	X \$10,000 - \$24,999
		Colf Costs	
		Golf Carts	LESS THAN \$5,000 \$5,000 - \$9,999
		į	X \$10,000 - \$24,999
		Vehicle	LESS THAN \$5,000 \$5,000 - \$9,999
		i	X \$10,000 - \$24,999 \$25,000 OR MORE
		1	
L			
1			

# LIABILITIES OF BUSINESS ASSOCIATIONS

PART 11C

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

Describe all liabilities of each corporation, firm, partnership, limited partnership, limited liability partnership, professional corporation, professional association, joint venture, or other business association in which you, your spouse, or a dependent child held, acquired, or sold 50 percent or more of the outstanding ownership and indicate the category of the amount of the assets. For more information, see FORM PFS--INSTRUCTION GUIDE.

the child is listed on the cover	once.				
1 BUSINESS	N.A.	AME AND ADDRESS			
ASSOCIATION	(Check If Filer's Home Address)				
	Rio Shelters Inc				
	PO Box 5958				
	BROWNSVILLE, TX 78523				
2 BUSINESS TYPE					
2 BUSINESS TIFE	Corporation				
3 HELD, ACQUIRED, OR SOLD BY	X FILER SPOUSE	DEPENDENT CHILD			
4 LIABILITIES	DESCRIPTION	CATEGORY			
4 EINBIETTEO	International Bank of Commerce				
	The mailting Bank of Commerce	LESS THAN \$5,000 \$5,000 - \$9,999			
		\$10,000 - \$24,999 X \$25,000OR MORE			
	International Bank of Commerce	LESS THAN \$5,000 \$5,000 - \$9,999			
		\$10,000 - \$24,999 X \$25,000OR MORE			
		\$10,000 - \$24,999 X \$25,000OR MORE			

## **BOARDS AND EXECUTIVE POSITIONS**

**PART 12** 

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

List all boards of directors of which you, your spouse, or a dependent child are a member and all executive positions you, your spouse, or a dependent child hold in corporations, firms, partnerships, limited partnerships, limited liability partnerships, professional corporations, professional associations, joint ventures, other business associations, or proprietorships, stating the name of the organization and the position held. For more information, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which

the child is listed on the C	cover Sheet.	ourney, maisais and orma ass	at monity of all ropotally by protaining an	
1 ORGANIZATION	Rio Shelters, Inc.			
2 POSITION HELD	President			
3 POSITION HELD BY	X FILER	SPOUSE	DEPENDENT CHILD	

# PERSONAL FINANCIAL STATEMENT

#### PARTS MARKED "NOT APPLICABLE" BY FILER

FORM PFS
COVER SHEET
PAGE 2

On this page, indicate any Parts of Form PFS that are not applicable to you. If you do not place a check in a box, then pages for that Part must be included in the report. If you place a check in a box, do NOT include pages for that Part in the report.

6	PAR	TS NOT APPLICABLE TO FILER
		N/A Part 1A - Sources of Occupational Income
	Χ	N/A Part 1B - Retainers
		N/A Part 2 - Stock
	Χ	N/A Part 3 - Bonds, Notes & Other Commercial Paper
	Χ	N/A Part 4 - Mutual Funds
		N/A Part 5 - Income from Interest, Dividends, Royalties & Rents
		N/A Part 6 - Personal Notes and Lease Agreements
		N/A Part 7A - Interests in Real Property
		N/A Part 7B - Interests in Business Entities
	Χ	N/A Part 8 - Gifts
	X	N/A Part 9 - Trust Income
	X	N/A Part 10A - Blind Trusts
	Χ	N/A Part 10B - Trustee Statement
		N/A Part 11A - Business Associations
		N/A Part 11B - Assets of Business Associations
	X	N/A Part 11C - Liabilities of Business Associations
		N/A Part 12 - Boards and Executive Positions
	Χ	N/A Part 13 - Expenses Accepted Under Honorarium Exception
	Χ	N/A Part 14 - Interest in Business in Common with Lobbyist
	Χ	N/A Part 15 - Fees Received for Services Rendered to a Lobbyist or Lobbyist's Employer
	Χ	N/A Part 16 - Representation by Legislator Before State Agency
	Χ	N/A Part 17 - Benefits Derived from Functions Honoring Public Servant
	Χ	N/A Part 18 - Legislative Continuances
	Х	N/A Part 19 - Contracts with Governmental Entity
	Χ	N/A Part 20 - Bond Counsel Services Provided by a Legislator

verification page on a personal statement filed electronically idual required to file the personal financial statement.  verification page on a personal financial statement filed with	Without proper verification, the statement is not considered filed.  with the Texas Ethics Commission must have the electronic signature of the an authority other than the Texas Ethics Commission must have the signature as wells as the signature and stamp or seal of office of a notary public or other statement covers calendar year ending December 31, 2018, and is true and correct and includes all information required to be reported by me under chapter 572 of the Government Code.
idual required to file the personal financial statement.  verification page on a personal financial statement filed with e individual required to file the personal financial statement a	I swear, or affirm, under penalty of perjury, that this financial statement covers calendar year ending December 31, 2018, and is true and correct and includes all information required to be reported by me under chapter
e individual required to file the personal financial statement a	I swear, or affirm, under penalty of perjury, that this financial statement covers calendar year ending December 31, 2018, and is true and correct and includes all information required to be reported by me under chapter
	covers calendar year ending December 31, 2018 , and is true and correct and includes all information required to be reported by me under chapter
	The Honorable Eduardo A. Lucio Jr.
	Signature of Filer
FIX NOTARY STAMP / SEAL ABOVE	
om to and subscribed before me, by the said, 20, to certify which, witnes	, this the day ss my hand and seal of office.
Signature of officer administering oath Printed name	ne of officer administering oath Title of officer administering oath